

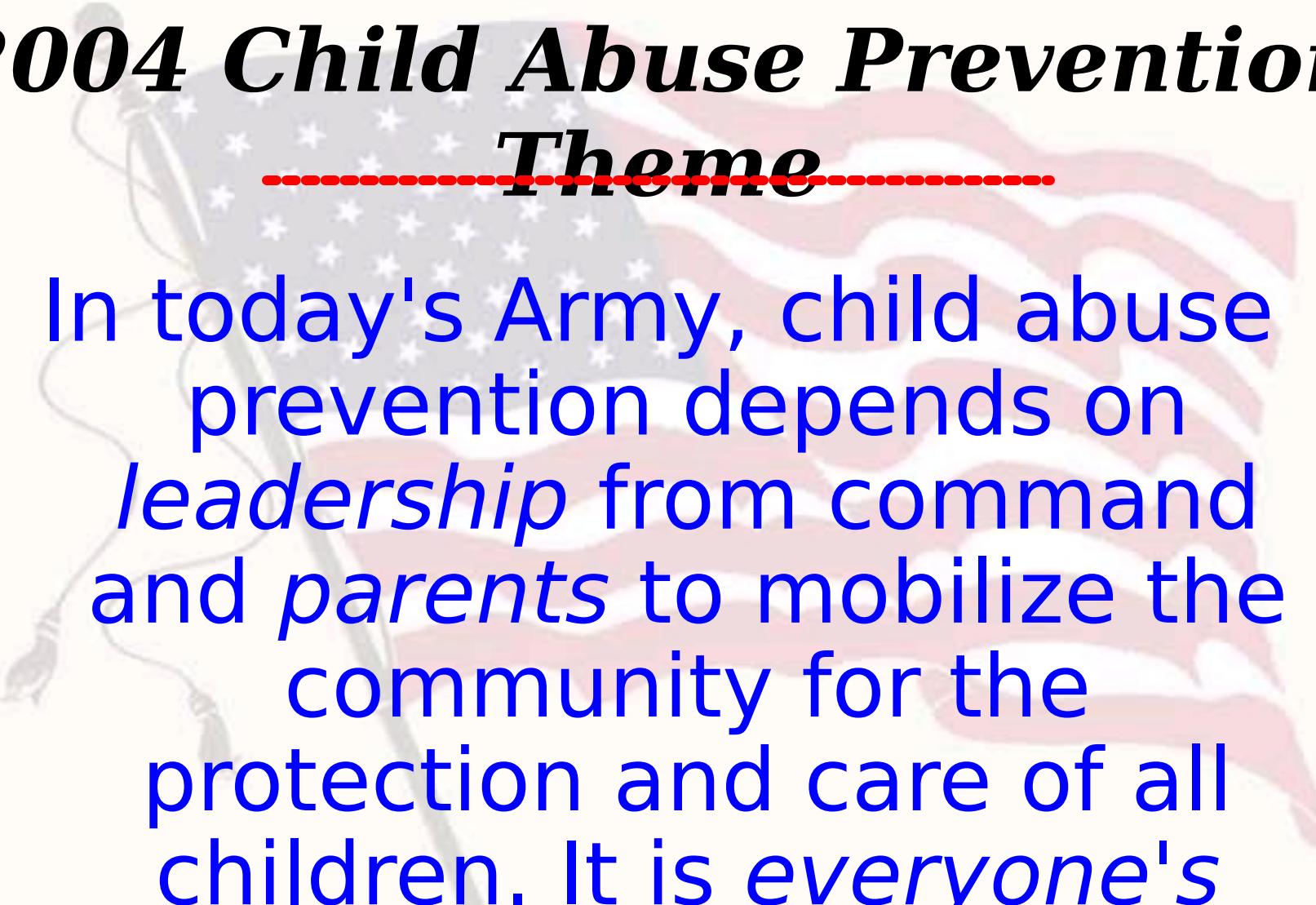
A large, semi-transparent American flag is positioned in the background, slightly to the left of the center. The flag is waving, with its stars in the upper left corner and its stripes running horizontally across the slide.

April is Child Abuse Prevention Month in the Army

*DCO VTC
5 April 2004*

***Pamila Richter
Health Promotion
Director
US Army Dental***

2004 Child Abuse Prevention Theme



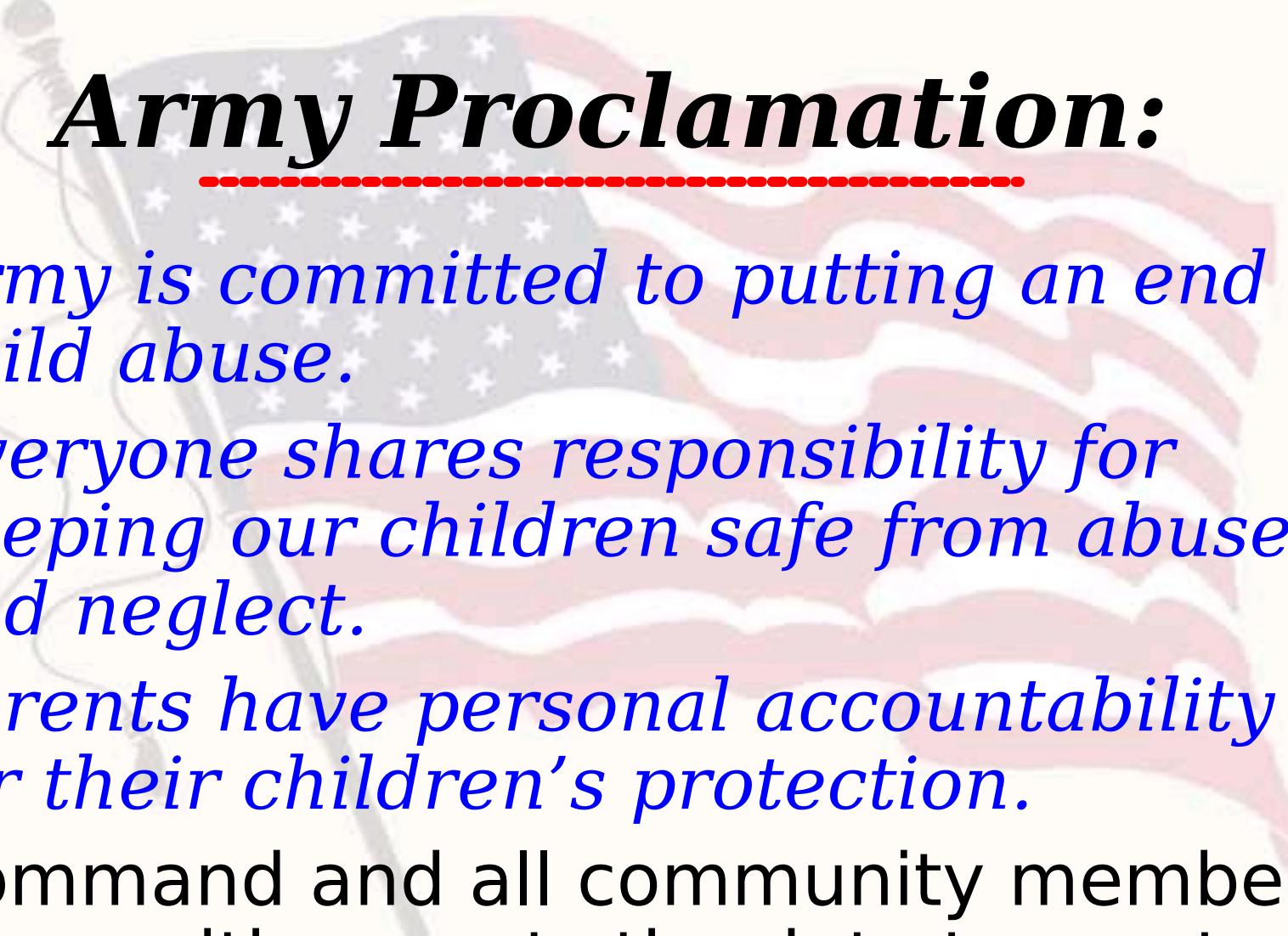
In today's Army, child abuse prevention depends on leadership from command and parents to mobilize the community for the protection and care of all children. It is everyone's responsibility to keep children safe

A faded background image of the United States flag, showing the stars and stripes, with a flagpole visible on the left side.

Slogan for 2004:

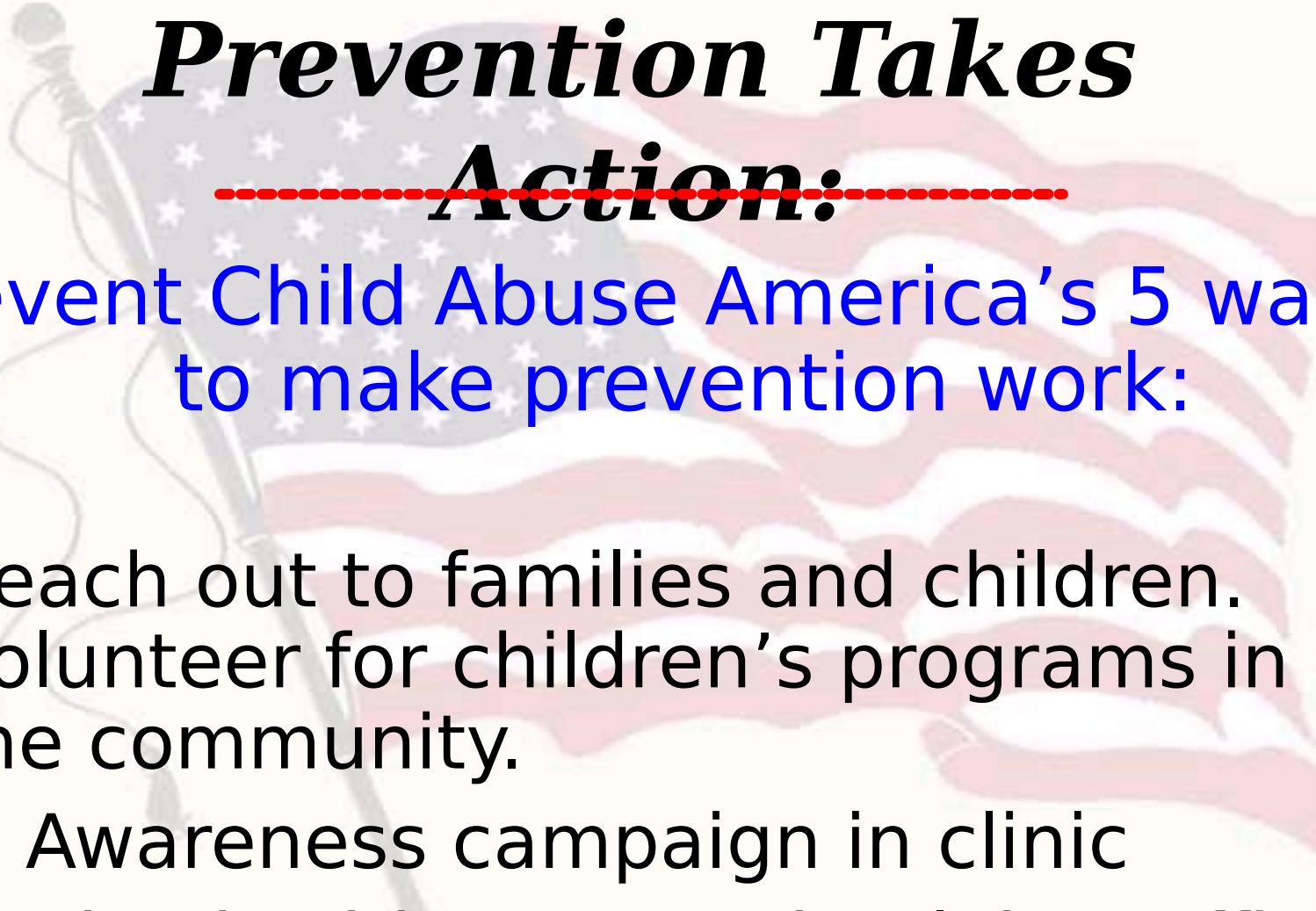
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**Building Safe Communities
Prevents Child Abuse**



Army Proclamation:

- *Army is committed to putting an end to child abuse.*
- *Everyone shares responsibility for keeping our children safe from abuse and neglect.*
- *Parents have personal accountability for their children's protection.*
- Command and all community members share with parents the duty to create a supportive and secure environment.



Prevention Takes Action:

**Prevent Child Abuse America's 5 ways
to make prevention work:**

1. Reach out to families and children.
Volunteer for children's programs in
the community.
 - Awareness campaign in clinic
 - Check with ACS or Chaplain's office
 - Mentor

Prevention Takes Action:

**Prevent Child Abuse America's 5 ways
to make prevention work:**

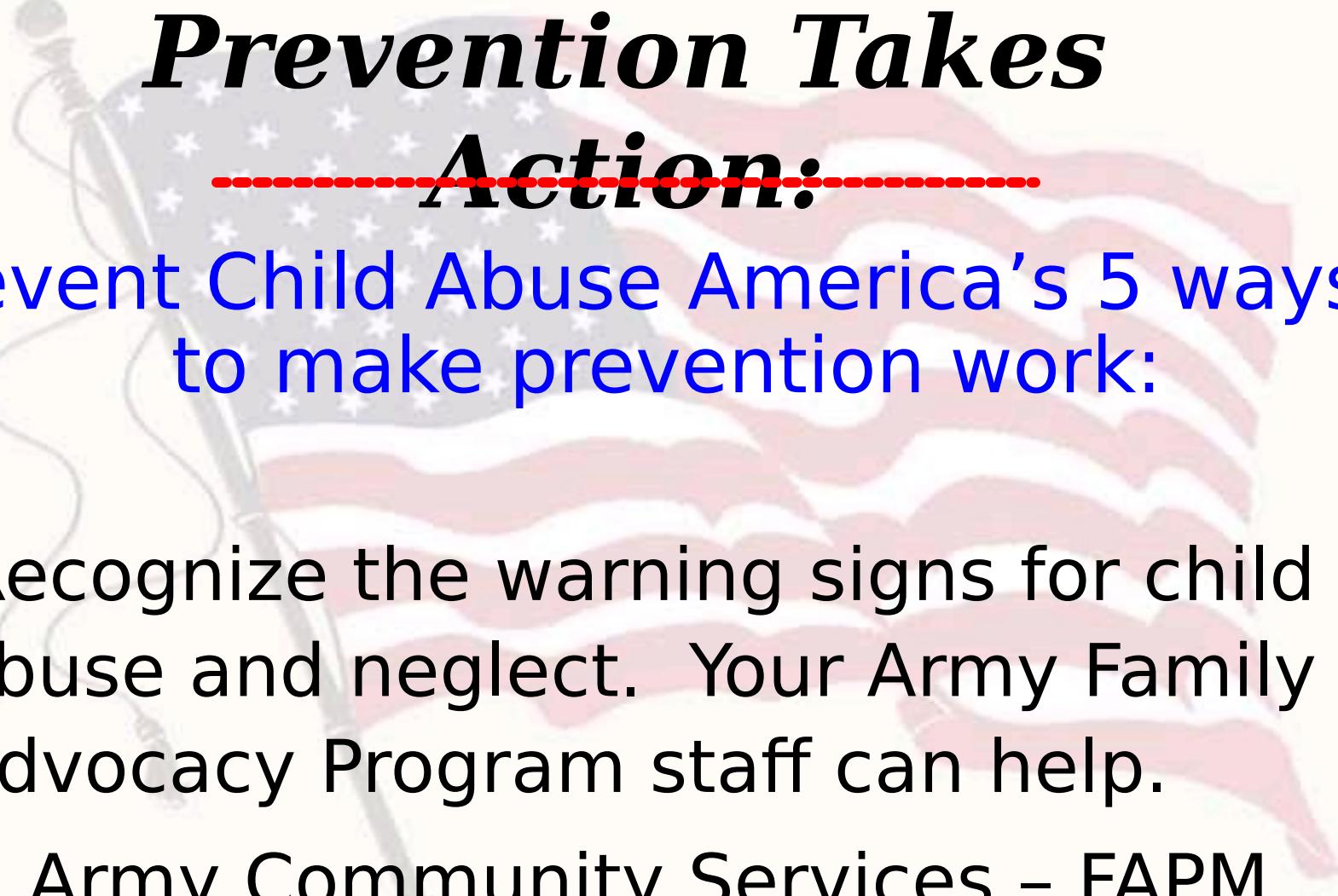
2. Raise the issue. Don't allow the issue of child abuse to be swept under the rug.
 - Ask questions
 - Don't ignore incidents in public places

Prevention Takes Action:

**Prevent Child Abuse America's 5 ways
to make prevention work:**

3. Remember the risk factors that put our children in danger:

- Isolation
- Stress
- Substance abuse
- Anger
- Indifference



Prevention Takes Action:

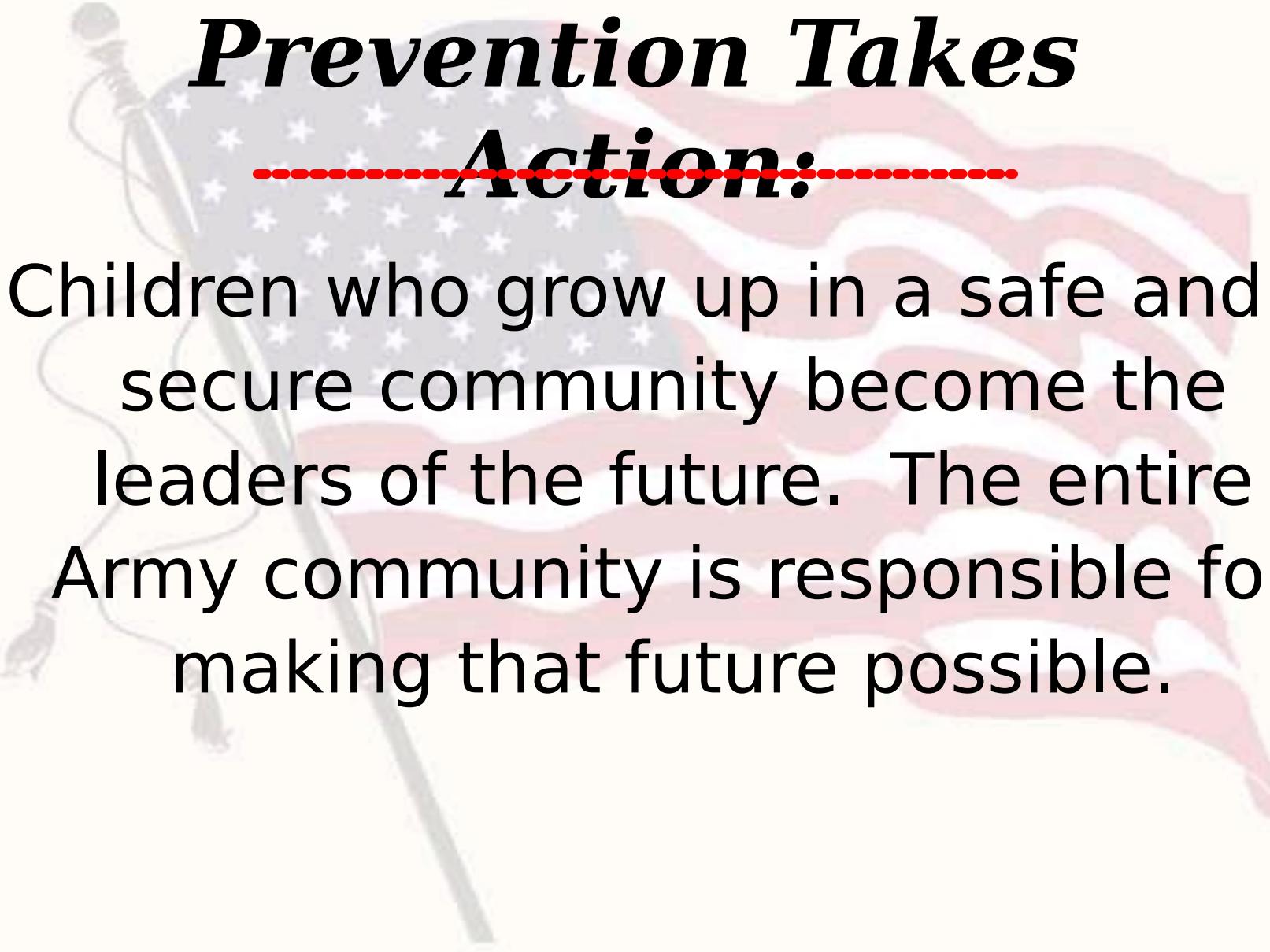
**Prevent Child Abuse America's 5 ways
to make prevention work:**

4. Recognize the warning signs for child abuse and neglect. Your Army Family Advocacy Program staff can help.
 - Army Community Services – FAPM
 - Social Work Services

Prevention Takes Action:

Prevent Child Abuse America's 5 ways
to make prevention work:

5. Report suspected abuse and neglect to your Installation Reporting Point of Contact (RPOC).
 - Find the phone number
 - Keep it handy



Prevention Takes Action:

Children who grow up in a safe and secure community become the leaders of the future. The entire Army community is responsible for making that future possible.

DENTAC's *Role*



- Support AFAP through a clinic awareness campaign
 - Display posters
 - Make Hot-line telephone numbers available
- Contact your local FAPM for more information
- PANDA in-service

APRIL IS CHILD ABUSE PREVENTION MONTH IN THE ARMY



FAMILY

LEADERSHIP



COMMUNITY

**WORKING TOGETHER TO CREATE
A SAFE COMMUNITY FOR CHILDREN**

APRIL IS CHILD ABUSE PREVENTION MONTH IN THE ARMY



LEADERSHIP

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FAMILY

LEADERSHIP



COMMUNITY

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A SAFE COMMUNITY FOR CHILDREN

Family Violence



- ❖ *Child Abuse and Neglect*
- ❖ *Spousal Abuse ("domestic violence")*
- ❖ *Elder Abuse and Neglect*

P.A.N.D.A.



Prevent
Abuse and
Neglect
through
Dental
Awareness

Artwork and acronym used by permission of the P.A.N.D.A.
Coalition

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P.A.N.D.A.



- *Heighten awareness of problem*
- *Red Flags*
- *Develop partnerships*
- *Identification of symptoms*
- *Document Injuries*
- *Reporting process*

AR 608-18

Defines



- *Abuse and Neglect*
- *DENTAC responsibilities*
- *Case Review Committee (CRC)*
- *Reporting Point of Contact (RPOC)*
- *Family Advocacy Program Manager (FAPM)*

Family Violence and



- ❖ *As much as 75% of physical abuse involves injuries to the head or neck*
- ❖ *Offenders often avoid the same physician, but return to the same dental office*
- ❖ *Active Duty - Annual dental exams*

da Fonesca et al, 1992; Berrios et al, 1991; Becker et al, 1978

Goal of Good Parenting



Enabling a child to grow up with feelings of:

- *Satisfaction*
- *Security, and*
- *Self-respect*







Typical Sites for Inflicted Injuries of Abuse



- ❖ *Cheek*
- ❖ *Ear*
- ❖ *Lip and labial frenum*
- ❖ *Neck*
- ❖ *Buttocks and lower back*
- ❖ *Genitals and inner thighs*



Contributing Factors (NOT Cause) to Abuse

- ***Drug and alcohol abuse***
- ***Stress***
- ***Lack of a support network***
- ❖ ***"Learned behaviors" -
many offenders are,
themselves,
victims of abuse***





Patient Histories

- ❖ *Obtain histories for patient and sponsor separately. Do they match?*
- ❖ *Is the injury consistent with the history?*
- ❖ *History of similar injuries in the past?*





24 hours after
accident...



2 weeks after
accident...





Physical findings that may be mistaken for Abuse



- *Accidental*
- *Genetic*
- *Acquired*
- *Infectious*



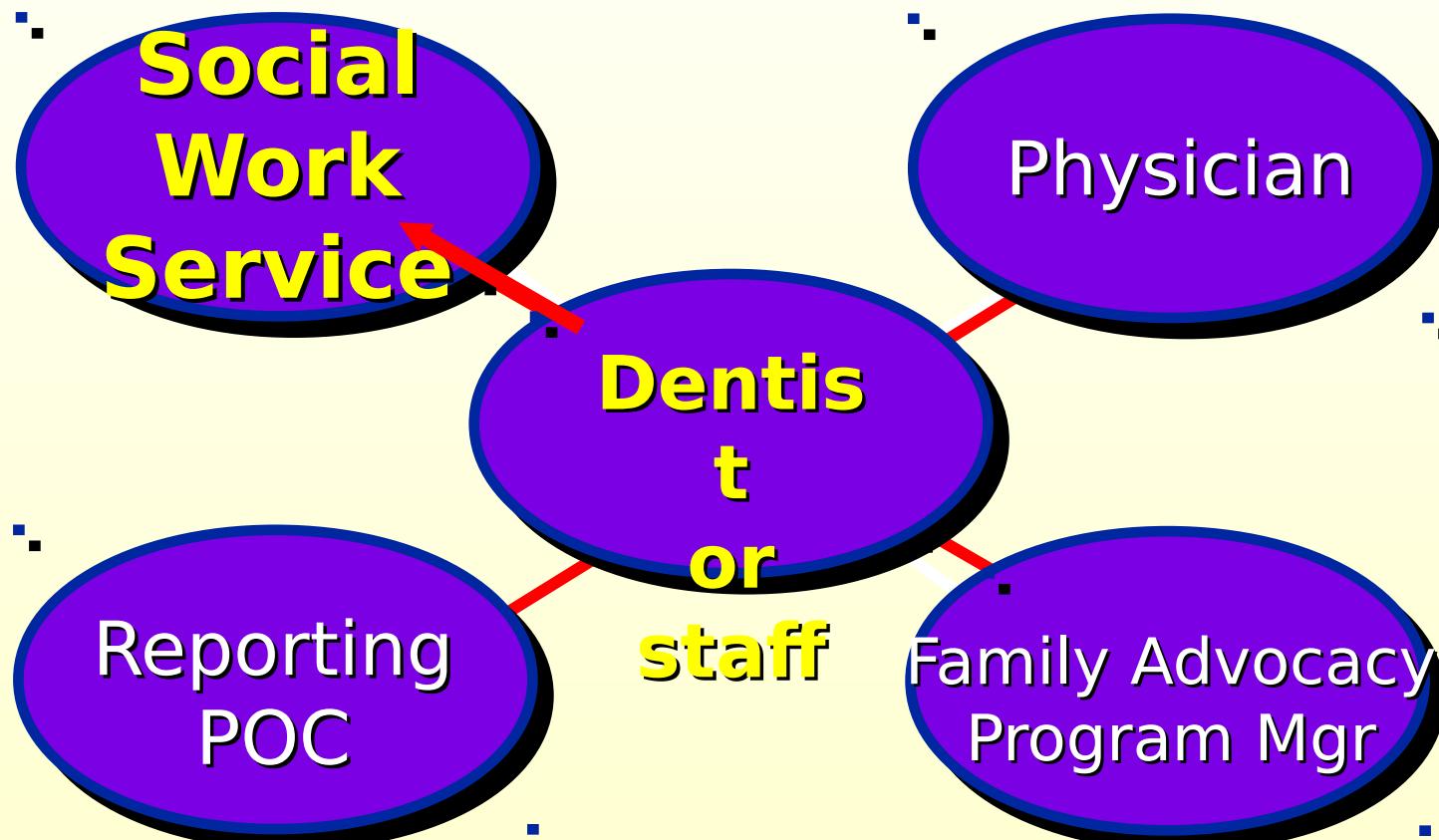


Legal and Liability Issues



- ❖ ***DoD: Health Care Providers are mandated reporters***
- ❖ ***Confidentiality***
- ❖ ***Privileged communication***
- ❖ ***Failure to report***
- ❖ ***ADA Principles of Ethics and Code of Professional Conduct***

Consultations / Partnerships



Where to Report



*Report Point of
Contact (RPOC)*

*Get the phone
number and keep
it available*

Remember!



*Reporting is not an
accusation; it is a call for help.
RPOC XXX-XXXX*

**National referral service
Hotline:**

DOMESTIC VIOLENCE "TIP SHEET" FOR DENTAL PROFESSIONALS

These apply to both adult and child abuse cases.

- ✓ **First, remember that your role is primarily to identify possible cases, and not to fully diagnose.**
- ✓ **Then, your role is to properly refer.**

◆ A high percentage of injuries involve the head and neck. Some are intraoral. No matter what the injury noticed (bruise, scratch, chipped tooth), the best way to approach it is to causally, non-judgementally, non-threateningly, just ask something like:

"Oh, what happened there?" or "Nice _____ (scratch, bruise, etc). How'd that happen?" Then listen. And look. Watch and listen for some possible tip-offs that it may have been non-accidental trauma. Such as:

- dropping of the eyes, no eye contact, with answering
- very quiet voice in answering
- hostility in the answer
- no answer
- if a child case, a parent who very quickly tries to answer for the child
- any answer that does not "fit" as the cause of the injury you see

◆ If you are a male, accept that sometimes a dental assistant or doctor who is female, can get the above information better than a male can. If you feel that is the case, give that person time to chat with the patient, but be sure that beforehand she is aware of how you want her to discuss things with the patient (see above), and does not go beyond the above methods.

Health Promotion is Mission Essential.

It's a no-brainer for readiness.

With the DENCOM materials,
YOU...

Just add patients!

Need Something? Call!



USA DENCOM

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Questions?

